

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	(AN)		11-30-01
O.I.P.E. CLASSIFIER		1121 10	12-12-01
FORMALITY REVIEW	K.D		1-8-02
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 " ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	0	0	
8	0	0	
9	✓	✓	
10	✓	✓	
11	0	0	
12	0	0	
13	0	0	
14	0	0	
15	0	0	
16	✓	✓	
17	0	0	
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If more than 150 claims or 10 actions  
 staple additional sheet here

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BEST AVAILABLE COPY

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